

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
 (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER
JAB 1290-USA

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

(+)- NORCISAPRIDE

the specification of which (check only one item below):

is attached hereto.

was filed as United States application

Serial No. 09/113,684

on July 10, 1998

and was amended

on July 10, 1998 (if applicable).

was filed as PCT international application

Number

on

and was amended under PCT Article 19

on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (in PCT indicate PCT#)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
European Patent Office	97.202.161.2	11 July 1997	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
European Patent Office	98.200.661.1	4 March 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

Combined Declaration For Patent Application and Power of Attorney (Continued)
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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER
35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
60/052973	18 July 1997		X	

PCT APPLICATIONS DESIGNATING THE U.S.		
PCT APPLICATION NO	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and matriculation number)
Audley A. Ciamporcero, Jr. (Reg. #26,051), Steven P. Berman (Reg. #24,772),
Andrea L. Colbey (Reg. #30,194), Michael Stark (Reg. # 32,495), Ellen C. Coletti (Reg. #34,140) and Mary A. Appollina (Reg. # 34,087)

Send Correspondence to:

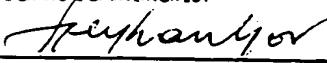
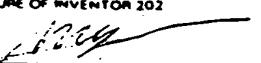
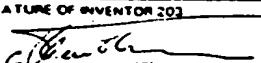
Audley A. Ciamporcero
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003

Direct Telephone Calls to:
(Name and telephone number)

Ellen C. Coletti
(732) 524-2359

201	FULL NAME OF INVENTOR	FAMILY NAME Heykants	FIRST GIVEN NAME Jozef	SECOND GIVEN NAME Jan Pieter
	RESIDENCE & CITIZENSHIP	CITY B-2350 Vosselaar	STATE OR FOREIGN COUNTRY Belgium	COUNTRY OF CITIZENSHIP Belgium
	POST OFFICE ADDRESS	Janssen Pharmaceutica N.V. Turnhoutseweg 30	CITY B-2340 Beerse, Belgium	STATE & ZIP CODE/COUNTRY Belgium
202	FULL NAME OF INVENTOR	FAMILY NAME Mepens	FIRST GIVEN NAME Antonius	SECOND GIVEN NAME Adrianus Hendrikus Petrus
	RESIDENCE & CITIZENSHIP	CITY B-2340 Beerse	STATE OR FOREIGN COUNTRY Belgium	COUNTRY OF CITIZENSHIP the Netherlands
	POST OFFICE ADDRESS	Janssen Pharmaceutica N.V. Turnhoutseweg 30	CITY B-2340 Beerse, Belgium	STATE & ZIP CODE/COUNTRY Belgium
203	FULL NAME OF INVENTOR	FAMILY NAME Meuldermans	FIRST GIVEN NAME Willem	SECOND GIVEN NAME Emiel Gustaaf
	RESIDENCE & CITIZENSHIP	CITY B-2275 Gierle	STATE OR FOREIGN COUNTRY Belgium	COUNTRY OF CITIZENSHIP Belgium
	POST OFFICE ADDRESS	Janssen Pharmaceutica N.V. Turnhoutseweg 30	CITY B-2340 Beerse, Belgium	STATE & ZIP CODE/COUNTRY Belgium

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
		

Combined Declaration For Patent Application and Power of Attorney (Continued)
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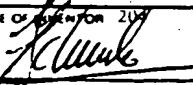
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Andrea L. Colbey (Reg. #30,194), Michael Stark (Reg. # 32,495), Ellen C. Coletti (Reg. #34,140) and Mary A. Appollina (Reg. # 34,087)

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			Ellen C. Coletti (732) 524-2359

204	FULL NAME OF INVENTOR	FAMILY NAME Schuurkes	FIRST GIVEN NAME Joanne	SECOND GIVEN NAME Adrianus Jacobus
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	POST OFFICE ADDRESS	POST OFFICE ADDRESS Janssen Pharmaceutica N.V. Turnhoutseweg 30	CITY B-2340 Beerse, Belgium	STATE & ZIP CODE/COUNTRY Belgium
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

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SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR
		

DATE

6 November 1997

DATE

DATE

Combined Declaration For Patent Application and Power of Attorney (Continued)
(Includes Reference to PCT International Applications)

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and Mary A. Appollina (Reg. # 34,087)

Send Correspondence to:

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Ellen C. Coletti
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205	FULL NAME OF INVENTOR	FAMILY NAME Bosmans	FIRST GIVEN NAME Jean-Paul	SECOND GIVEN NAME René Marie André
	RESIDENCE & CITIZENSHIP	CITY B-2310 Rijkevorsel	STATE OR FOREIGN COUNTRY Belgium	COUNTRY OF CITIZENSHIP Belgium
	POST OFFICE ADDRESS	Janssen Pharmaceutica N.V. Turnhoutseweg 30	CITY B-2340 Beerse, Belgium	STATE & ZIP CODE/COUNTRY Belgium
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
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6 November 1998	DATE	DATE